

Blane Cottage Care Home Service

Blane Cottage
Kirkoswald Road
Maidens
KA26 9NF

Telephone: 01655 272 051

Type of inspection:
Unannounced

Completed on:
6 December 2024

Service provided by:
Radical Services Ltd

Service provider number:
SP2003002568

Service no:
CS2008178534

About the service

Blane Cottage is a care home service for up to two children and young people. The house provides accommodation on one level and has two bedrooms for young people, both with en-suite facilities. They also share a living-dining room, additional sitting room and kitchen. The main garden is to the rear of the house. The cottage is situated on the outskirts of the small coastal village of Maidens in South Ayrshire, about 14 miles from Ayr. The village has a bus service and a range of amenities, and there are additional facilities in nearby towns.

About the inspection

This was an unannounced inspection which took place on 19 and 20 November 2024 between 12:10 and 19:05 and 09:25 and 15:35 respectively. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection, we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- reviewed responses to surveys from one young person and six staff
- spoke with one young person using the service
- spoke with seven staff and managers
- observed practice and daily life
- reviewed documents.

Key messages

- Young people were protected from harm and felt safe. Whilst there was no evidence of adverse outcomes, there was scope to improve the quality of risk assessment processes.
- Staff minimised the use of physical restraint as a response to distressed behaviour by young people, which reflected the provider's commitment to restraint reduction.
- Management of young people's medication required improvement, including more robust oversight by managers.
- Continued support was needed to improve staff morale and enable them to more confidently and consistently implement the provider's framework of therapeutic care for young people.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support children and young people's rights and wellbeing?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

How well do we support children and young people's rights and wellbeing?

3 - Adequate

We evaluated this key question as **adequate**. This means there were some strengths but these just outweighed weaknesses. Improvements should be made by building on strengths while addressing those elements that are not contributing to positive experiences and outcomes for young people.

Action taken by the service to reduce the potential for harm and keep young people safe were working well on the whole, though there was scope for maximising effectiveness. Risk documents did not consider all areas of concern and were not consistently reviewed following incidents to prevent recurrence. Managers had previously identified the need for additional learning by some staff and as a result, there now appeared to be a better understanding of expectations in the event of protection concerns arising. Observation of interactions indicated young people felt safe at Blane: this was reflected in external professional feedback.

The service had minimised the use of physical restraint in response to distressed behaviour by young people. This provided greater protections for their wellbeing and dignity. A comprehensive review of restrictive practices and the implementation of a new positive behaviour approach, supported by staff training, were evidence of the provider's commitment to restraint reduction. There was a similar commitment to a framework of therapeutic care aimed at supporting young people with experience of trauma. However, the lack of a more consistent, confident and informed approach by the whole team was hampering progress. Managers were aware of this and were supporting staff development so they could maximise young people's experiences. This should be supported by a focused, coordinated action plan with timescales.

Young people benefited from positive and nurturing relationships with a number of staff. Managers recognised that they needed continued support to develop trust and feelings of security following some changes to the team.

The house was generally comfortable though some areas appeared less welcoming and attractive, partly as a result of recent and repeated damage. Consideration should be given to how best to ensure the environment fully reflects the service's vision and ethos.

Young people exercised a high level of choice in their day-to-day lives, with some limitations for reasons of safety. They received encouragement to contribute to the life of the home so it reflected their preferences, and to express their views, though this was an area in which they needed ongoing support. Independent advocacy was also available to help them contribute to decision-making. Managers took complaints by young people seriously, though formal responses should explain their options if they are not satisfied with the outcome.

Young people were supported to access primary care for positive health outcomes. Staff respected their choices not to engage at times and continued to promote ways of achieving healthier lifestyles. Specialist mental health provision had also been made available, though long waiting lists were a barrier. Management of young people's medication required improvement as there was potential for error and adverse outcomes (**see requirement 1**).

Some young people enjoyed regular social contact with peers and took part in a range of activities for exercise, enjoyment and stimulation. Attendance at school and engagement in learning had been successful in some instances. Despite persistent efforts to provide flexible, individualised programmes however, this was an ongoing challenge for some young people, and had hampered their progress.

The provider was committed to promoting young people's rights to continuing care, to increase the likelihood of a successful transition to the next stage of their lives as young adults.

Assessment and planning processes needed some improvements to maximise positive outcomes for young people. There was a lack of holistic assessment information on young people's strengths and functioning across all wellbeing areas: this could better inform planning. Plans should be more specific and measurable.

Increased capacity at leadership level following the appointment of a deputy manager had been a very positive step. We received very positive comments about their commitment to working collaboratively with partner agencies for the benefit of young people. However, staff feedback provided a very mixed picture of morale in the team. There was a need for more momentum in addressing the remaining staffing challenges already identified by managers (see above).

There was also a variety of views about whether staffing arrangements in the service met young people's needs. We found no clear evidence of a significant adverse impact on young people's experiences, and managers had at times made adjustments in response to changing needs. However, these should continue to be carefully monitored, particularly in light of a recent increase in incidents of distressed behaviour.

Staff had taken part in a varied range of relevant learning and development opportunities and felt these had been of benefit in supporting them to meet young people's needs. Managers should now ensure that outstanding mandatory training is completed.

A comprehensive range of quality assurance systems had had a positive impact on aspects of the service's performance, though the pace of change could be increased. We offered some suggestions for maximising learning from incident analysis. Audits of medication had been less effective in identifying weaker areas of practice so we will include this in the relevant requirement. The service's development plan provided a foundation for making improvements to the service though could better reflect aspects of the Promise, made to young people following the independent review of care.

Requirements

1. The provider must ensure that arrangements for managing young people's medication promote and safeguard their health and wellbeing and reflect relevant good practice guidance and legislation. To do this, the provider must at a minimum and by no later than 17 January 2025:

- (i) ensure that staff make records of medication that is prescribed to be taken regularly by young people, including all instances when medication is offered and declined;
- (ii) ensure that instructions for administering all medication are understood and adhered to by staff and are supported by clear guidance and accurate recording systems;
- (iii) ensure that staff are aware of and confidently implement the necessary adjustments when medication has not been taken as instructed;
- (iv) ensure that there is a comprehensive and robust quality assurance system covering management of young people's medication.

This is to comply with Regulation 4(1)(a) and (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To ensure that young people can participate fully in learning and reach their potential, the provider should review individual education provision and support.

This is to ensure that care and support is consistent with the Health and Social Care Standards, which state that: 'I am supported to achieve my potential in education and employment if this is right for me' (HSCS 1.27).

This area for improvement was made on 25 September 2022.

Action taken since then

The service had achieved some positive outcomes for young people in relation to education provision. As we have identified in this report, despite efforts to provide flexible and individualised support, this was an area which some young people found challenging.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support children and young people's rights and wellbeing?	3 - Adequate
7.1 Children and young people are safe, feel loved and get the most out of life	3 - Adequate
7.2 Leaders and staff have the capacity and resources to meet and champion children and young people's needs and rights	3 - Adequate

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